

**Motor Vehicle Administration**

6601 Ritchie Highway, N.E.
Glen Burnie, Maryland 21061

Driving Certification for Maryland Commercial Driver's License Holders

PLEASE READ AND COMPLETE.

Applicant Information (Please Print): *Indicates a required field

<u>Driver License Number</u> *		<u>Date of Birth (Month/Day/Year)</u> *	
<u>First Name</u> *	<u>Middle Name</u>	<u>Last Name</u> *	<u>Suffix</u>
** You must provide either a Contact Phone Number or Email Address		<u>Contact Phone Number</u> **	
		<u>Email Address</u> **	

Certification: Select one of the following four options:

I am qualified to operate a commercial motor vehicle *

☐ Interstate and have a valid medical examiner's certificate. (NI)

☐ Intrastate (within MD) **OR** I am under the age of 21 **OR** I have an approved MVA CDL Medical Waiver. (NA)

☐ Interstate and am exempt from obtaining a medical examiner's certificate. (EI)

☐ Intrastate (within MD) and meet all applicable MD State requirements. (EA)

I certify, under penalty of perjury that the statements made by me on this application are true and correct to the best of my knowledge, information and belief.

Signature

Date